

Snyder Insurance Services, Inc.

All of your insurance needs in one stop!

MEDICAL PLANS WITH INCENTIVES FOR HEALTHY LIFESTYLES

Offered by "Snyder Health Services" - a division of Snyder Insurance Services, Inc.

Benefits:

- Tax Savings
- Premium Savings
- Possible Refund of Premiums on Self-Funded Plans
- Efficient Claim Handling
- Personalized service for you and employees!

How It Works

Two of our clients who signed up for this partial self-funded plan **saved** close to 30% of total premiums paid – due to the **lack of utilization** of claims paid.

Snyder Health Services can offer Partially Self-Funded Medical Plans that only require 3 employees (working 20+ hours per week). These Medical Plans are available in most States!

If you need coverage for individual plans Snyder Health Services has a website where you can quote, pay and issue your own policies online. Visit our website at www.snydermarketplace.com. If you need group coverage just complete the attached application and fax or email back to our office.

Your current group policy is written on a month to month basis and can be changed anytime!

We will include up to four plan design options in your quote.

Call us if you have any questions.

*Eligibility is based on number of enrolled employees and family members. Contact us for more details.

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Medical Insurance Application

Snyder Health Services

7450 W 130th Street Suite 230 Overland Park, KS 66213 (800) 874-6704



Do you need a health insurance plan for you, your family, or your employees?

Do you want a price that competes or beats the ACA?



Return this page for your Free Quote!

Requested Effective Date:

Snyder Health Services can HELP YOU!

Contact Information:									
Business Name:									
Contact Person:									
Street Address:									
City/State/Zip/County:									
Contact Numbers:	Phone:			Fax:					
Email Address:		-			-				
□ Co-Pay with \$1,000 □Co-Pay with \$2,000 □HSA with \$2,000 □HSA with \$5,000 □ All									
Selections Available: <u>Employee Only</u> <u>E + Child</u> (Employee & Children) <u>E + Spouse</u> (Employee & Spouse) <u>E + Family</u> (Employee, Spouse & Children)									
Employee Selection for Individual or Family Members: (Attach a separate page if necessary)									
Name of Employee	M/F	Employee	Spouse	Covered Dependents Selection	Number of	Age & Sex			
		DOB	DOB	(Circle one) Employee Only E+Child E+Spouse E+Family	Children	of Children			
				Employee Only E + Child E + Spouse E + Family					

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